

AO 440 (Rev 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Eastern District of Texas



TONY THAI

Plaintiff(s)

v.

WILD EYE DESIGNS INC.

Defendant(s)

Civil Action No 2:15-CV-01165

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address)

Warren Horwitz
c/o Wild Eye Designs Inc.
5380 N. Ocean Drive
Singer Island, Florida 33404

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Aaron P. Peacock
Gagnon, Peacock & Vereeke, PLLC
4245 N. Central Expressway
Suite 250, Lock Box 104
Dallas, Texas 75205

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: _____

6/30/15



CLERK OF COURT

Signature of Clerk or Deputy Clerk

EXHIBIT

B-1

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Civil Action No. 2:15-CV-01165

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) Warren Horwitz
 was received by me on (date) 06/30/2015.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____
 _____, a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☒ I served the summons on (name of individual) Warren Horwitz, who is
 designated by law to accept service of process on behalf of (name of organization) Wild Eye Designs Inc.
 via certified mail (see attached) on (date) 07/06/2015; or

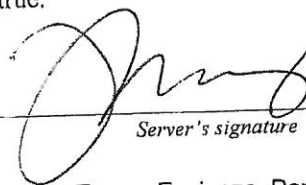
☐ I returned the summons unexecuted because _____; or

☐ Other (specify): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: 07/13/2015



Server's signature

Teresa Espinoza, Paralegal

Printed name and title

Gagnon, Peacock & Vereeke, PLLC
4245 N. Central Expressway, Suite 250
Dallas, Texas 75205

Server's address

Additional information regarding attempted service, etc:

GAGNON, PEACOCK & VEREEKE, PLLC

Attorneys and Counselors at Law

D.G. Gagnon
J.B. Peacock, Jr.
David M. Vereeke*
Aaron P. Peacock*
Colin P. Benton

* Board Certified-Personal Injury Trial Law
Board Certified-Civil Trial Law
Texas Board of Legal Specialization
+ Admitted in the US Patent & Trademark Office

Highland Park Tower, Second Floor
4245 N. Central Expressway
Suite 250, Lock Box 104
Dallas, Texas 75205
Telephone: (214) 824-1414
Telecopier: (214) 824-5490
www.GapsLegal.com

Teresa Espinoza
NALA Certified Paralegal
teresa@gapslaw.com

July 2, 2015

VIA CMRRR 7011 2000 0002 6160 8113

Warren Horwitz
c/o Wild Eye Designs Inc.
5380 N. Ocean Drive
Singer Island, Florida 33404

RE: Case No. 2:15-cv-1165; *Tony Thai v. Wild Eye Designs Inc.*; in the U.S. District
Court for the Eastern District of Texas, Marshall Division.

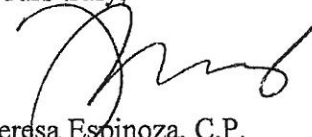
Dear Mr. Horwitz:

Enclosed please find the following:

1. Summons in a Civil Action
2. Plaintiff's Original Complaint
3. Civil Cover Sheet
4. Certificate of Interested Persons

Thank you for your attention to this matter.

Yours truly,



Teresa Espinoza, C.P.
Certified Paralegal

Enc.

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

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OFFICIAL USE

Postage	\$	Postmark Here
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Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To: Horwitz
 Street, Apt. No.,
 or PO Box No. 5380 N. Ocean Dr.
 City, State, ZIP+4® Singer Island, FL 33404

PS Form 3800, August 2006 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to: <u>Warren Horwitz</u> <u>c/o Wild Eye Designs Inc.</u> <u>5380 N. Ocean Dr.</u> <u>Singer Island, FL 33404</u></p>	<p>A. Signature <input checked="" type="checkbox"/> <u>Nej</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____</p> <p>C. Date of Delivery <u>7-6-15</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label)</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>7011 2000 0002 6160 8112</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	